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ATTORNEY DOCKET NO.: SHE-6933

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Inventor(s): SHLOMO GABBAY Confirmation No.: 5568
 Application No.: 10/782,702 Examiner: Alvin J. Stewart
 Filing Date: February 19, 2004 Group Art Unit: 3738

Title: LOW PROFILE HEART VALVE PROSTHESIS

Mail Stop AMENDMENT
 Commissioner for Patents
 PO Box 1450
 Alexandria, VA 22313-1450

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Sir:

Transmitted herewith is/are the following in the above-identified application:

- Response/Amendment
 No additional fee
 Other: Postcard (1)

CLAIMS AS AMENDED									
FOR	(1) CLAIMS REMAINING AFTER AMENDMENT		(2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(3) PRESENT EXTRA	(4) SMALL ENTITY		(5) LARGE ENTITY		(6) ADDITIONAL FEES
	RATE	Fee			Rate	Fee			
TOTAL CLAIMS	20	MINUS	22	0	X \$ 25.00	0.00	X \$ 50.00		
INDEP. CLAIMS	03	MINUS	03	0	X \$100.00	0.00	X \$200.00		
[] First Presentation of a Multiple Dependent Claim					\$180.00		\$360.00		
SUBTOTAL OF ADDITIONAL FEES							0.00		0.00
EXTENSION	1ST MONTH		2ND MONTH	3RD MONTH		4TH MONTH			
Large Entity	<input type="checkbox"/> \$120.00		<input type="checkbox"/> \$450.00	<input type="checkbox"/> \$1,020.00		<input type="checkbox"/> \$1,590.00			
Small Entity	<input type="checkbox"/> 60.00		<input type="checkbox"/> 225.00	<input type="checkbox"/> 510.00		<input type="checkbox"/> 795.00		\$0.00	
<p>[] An extension for _____ month(s) has already been secured and the fee paid therefore of \$_____ is deducted from the total fee due for the total month(s) of extension now requested.</p> <p>(PO) Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.</p>									
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT							\$0.00		

- Charge any additional fees required by this paper or credit any overpayment in the manner authorized below.
 At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 20-0090 pursuant to 36 CFR 1.25. Additionally, please charge any fees to Deposit Account 20-0090 under 37 CFR 1.16 through 1.21 inclusive, and any other sections in Title 37 of the Code of Federal Regulations that may regulate fees. A duplicate copy of this sheet is enclosed.

CERTIFICATE OF MAILING (37 C.F.R. 1.8A)

I hereby certify that this correspondence is being deposited with the United States Postal Service, with sufficient postage, as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Date: 9/13/06
Lisa D. Jones
 LISA D. JONES

Respectfully submitted,

Date: September 13, 2006


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CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8A)

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

- deposited with the United States Postal Service, with sufficient postage, as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450
- transmitted by facsimile to the Patent and Trademark Office.

FACSIMILE


Signature

Date: 13 September 2006

Lisa D. Jones
(type or print name of person certifying)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:) SHLOMO GABBAY
Serial No.:) 10/782,702
Filed:) February 19, 2004
Examiner:) Alvin J. Stewart
Group Art Unit:) 3738
Confirmation No.:) 5568
Attorney Docket No.:) SHE-6933
Title:) <u>LOW PROFILE HEART VALVE PROSTHESIS</u>

AMENDMENT AND RESPONSE TO OFFICE ACTION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated June 13, 2006, issued in connection with the above-identified application, please enter and consider the following amendments and remarks.

Amendments to the claims are reflected in the **LISTING OF THE CLAIMS**, which begins on page 2 of this paper.

REMARKS begin on page 7 of this paper.